

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571) 273-2885

This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for INSTRUCTIQ maintenance fee notifications

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

32172

FEB 1 7 2006

7590

11/22/2005

DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP 1177 AVENUE OF THE AMERICAS (6TH AVENUE) 41 ST FL.

NEW YORK, NY 10036-2714

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. (Depositor's name)

(Signature)

		L	(Date		
APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/689,949	10/22/2003	Melchor D. Castellon	M5590.0009	4025	

TITLE OF INVENTION: DEVICE FOR OPENING THE BONNET OF A MOTOR VEHICLE

APPLN, TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	YES	\$700	\$300	\$1000	02/22/2006		
EXAMINER		ART UNIT	CLASS-SUBCLASS	7			
RESTIFO, JEFFREY J		3618	180-069200	<b>,</b>			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			printing on the patent front page, in names of up to 3 registered patents OR, alternatively, name of a single firm (having as red attorney or agent) and the nattered patent attorneys or agents. In no name will be printed.	a member a 2	, Shapiro, Morin & Oshinsky,		
	D RESIDENCE DATA TO B		4 ,,				
PLEASE NOTE: Unles recordation as set forth	ss an assignee is identified be in 37 CFR 3.11. Completion	low, no assignee data will of this form is NOT a substitution	appear on the patent. If an assigute for filing an assignment.	nee is identified below, the o	locument has been filed for		
(A) NAME OF ASSIGN	NEE	(B) RESIDI	ENCE: (CITY and STATE OR CO	UNTRY)			
::	te assignee category or catego		······································	Corporation or other private gr	oup entity Government		
a. The following fee(s) are Issue Fee	e enclosed:	4b. Paymen	• •	malagad			
			A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.				
Publication Fee (No small entity discount permitted)  Advance Order - # of Copies		The	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
a. Applicant claims	s (from status indicated above SMALL ENTITY status. See	37 CFR 1.27.	plicant is no longer claiming SMA	ALL ENTITY status. See 37 C	FR 1.27(g)(2).		
he Director of the USPTO OTE: The Issue Fee and sterest as shown by the re-	) is requested to apply the Issu Publication Fee (if required) v cords of the United States Pate	ee Fee and Publication Fee (ivill not be accepted from any ent and Trademark Office.	f any) or to re-apply any previous one other than the applicant a received	ly path issue ree to the applications of the second of the			
Authorized Signature	Morevel le. 1	Meelma	03 FC Date	Mary 15	2 394. 69 OP		
Typed or printed name	Edward A	Mei/man	Registration	1 No. 24.735			

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEB 1 7 2006 W

PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004. 10/689,949-Conf. #4025 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number FEE TRANSMITTAL October 22, 2003 Filing Date Melchor D. Castellon First Named Inventor For FY 2005 Examiner Name J. J. Restifo 3618 Applicant claims small entity status. See 37 CFR 1.27 Art Unit M5590.0009 TOTAL AMOUNT OF PAYMENT 1,030.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Other (please identify): Money Order None x Credit Card Check Dickstein Shapiro Morin & Oshinsky LLP Deposit Account Deposit Account Number: 50-2215 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee Charge fee(s) indicated below Charge any additional fee(s) or underpayment of Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES SEARCH FEES **EXAMINATION FEES FILING FEES Small Entity Small Entity** Small Entity Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 500 250 200 100 300 150 Utility 65 100 50 130 200 100 Design 160 80 100 150 300 Plant 200 250 600 300 300 150 500 Reissue n 100 0 0 Provisional 200 **Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description 50 25 Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) 200 100 360 180 Multiple dependent claims **Multiple Dependent Claims** Fee Paid (\$) **Total Claims** Extra Claims Fee Paid (\$) Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims Fee (\$) 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) Number of each additional 50 or fraction thereof Fee (\$) Extra Sheets **Total Sheets** (round up to a whole number) x /50 - 100 = Fees Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 2501 Utility issue fee 700.00 300.00 1504 Publication fee for early, voluntary, or normal ... 30.00 8001 Printed copy of patent w/o color SUBMITTED BY Registration No. 24.735 Telephone (212) 896-5471 Signature February 15, 2006 Date Name (Print/Type) Edward A. Meilman